

# BEST AVAILABLE COPY

SERIAL NUMBER 09/183,335	FILING DATE 10/30/98	CLASS 705	GROUP ART UNIT 2761	ATTORNEY DOCKET NO. M-7085US
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APPLICANT

ROBERT A. FOSTER, JERSEY CITY, NJ.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED

*RF* none

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

*RF* none

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

*RF* none

FOREIGN FILING LICENSE GRANTED 11/17/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NJ	SHEETS DRAWING 0	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 2
Verified and Acknowledged <i>RF</i>	Examiner's Initials _____ Initials _____				

ADDRESS

EDWARD C KWOK  
SKJERVEN MORRILL MACPHERSON  
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25 METRO DRIVE SUITE 700  
SAN JOSE CA 95110-1349

TITLE

DATA PROCESSING SYSTEM FOR PRICING, COSTING AND BILLING OF FINANCIAL TRANSACTIONS

FILING FEE RECEIVED \$988	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext.) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3004

SERIAL NUMBER 09/183,335	FILING DATE 10/30/1998 RULE	CLASS 705	GROUP ART UNIT 3628	ATTORNEY DOCKET NO. M-7085US
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## APPLICANTS

ROBERT A. FOSTER, JERSEY CITY, NJ;

\*\* CONTINUING DATA \*\*\*\*\* 745

\*\* FOREIGN APPLICATIONS \*\*\*\*\* 10348

IF REQUIRED, FOREIGN FILING LICENSE  
 GRANTED \*\* 11/17/1998

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>ED</i> Examiner's Signature	<i>WDF</i> Initials			

## ADDRESS

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 2001 Gateway Place  
 Ste 195E  
 San Jose, CA 95110

## TITLE

DATA PROCESSING SYSTEM FOR PRICING, COSTING AND BILLING OF FINANCIAL TRANSACTIONS

FILING FEE RECEIVED 988	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other
		<input type="checkbox"/> Credit